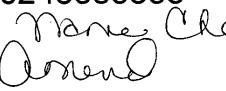
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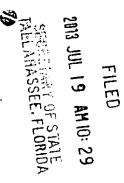
Office Use Only



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06/14/13--01015--005 **43.75



M /22/13

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Change the Corporations Name to: Tabernaculo Nuevo Comienzo of Jackson Ville inc
DOCUMENT NUMBER: N12000007083
The enclosed Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Martin A. Feliciano Name of Contact Person
Tabernaculo Muevo Comienzo Church Firm Company
8363 Oden AVe JacksonVille Fl. 32216
JacksonVille Fl. 32216 City/State and Zip Code
E-man address: (to boused for future annual report notification)
For further information concerning this matter, please call:
Martin A. Feliciano at (904) 422-1576 Name of Contact Person at (904) Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$43.75 Filing Fee & Certificate of Status \$43.75 Filing Fee & Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle
Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 19, 2013

MARTIN A. FELICIANO TABERNACULO NUEVO COMIENZO CHURCH 8363 ODEN AVENUE JACKSONVILLE, FL 32216

SUBJECT: TABERNACULO NUEVO COMIENZO JACKSONVILLE INC.

Ref. Number: N12000007083

We have received your document for TABERNACULO NUEVO COMIENZO JACKSONVILLE INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 713A00015389

Sylvia Gilbert Regulatory Specialist II

COVER LETTER

Division of Corporations abernaculo Nuevo Comienzo Jacksonville inc. 2000007083 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kike(Quahoo Com mail address: to be used for future annual report notification) For further information concerning this matter, please call: (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & S43.75 Filing Fee & Certified Copy □ \$35 Filing Fee □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2013 JUL 19 AM 10: 29

(Name of Corporation as currently filed with the Fl	orida Dept. of State) SECRE GARY OF STATE					
Tabernaculo Nuevo Comienzo Jacksonville Jack						
(Document Number of Corpo	ration (if known) 112 (10000 70 83					
amendment(s) to its Articles of Incorporation:	tes, this Florida Not For Profit Corporation adopts the following					
•						
A. If amending name, enter the new name of the corporat	tion:					
Tabernaculo Nuevo Lom	ienzo of Jacksonville Church The new attion" or "incorporated" or the abbreviation "Corp." or "Inc."					
name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ition" or "incorporated" or the abbreviation "Corp." or "Inc."					
	Same as before					
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS						
(Francipal Office address MOST BE A STREET ADDRESS	,					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as before.					
(Maning Business MAY BEATOS! OTTICE BOX)						
•						
-						
D. If amending the registered agent and/or registered offi	ice address in Florida enter the name of the					
new registered agent and/or the new registered office						
Name of New Registered Agent:	Same as before.					
Hume of New Registered Agent.						
	(Florida street address)					
New Registered Office Address:	(1707) our direct dual casy					
	Florida					
(City)	, Florida (Zip Code)					
New Registered Agent's Signature, if changing Registered	A gant:					
I hereby accept the appointment as registered agent. I am fa						
Signature of New Regi	stered Agent if changing					

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add Type of Action (Check One)	<u>v</u>	lohn Doe Mike Jones Sally Smith Name	Same a No Chang	s before Je. Address
1) Change				
Add				
Remove				
2) Change			<u> </u>	
Add				
Remove				
3) Change		•		
Add				
Remove				
4) Change				
Add				
Remove				
				
5) Change	 			<u></u>
Add				
Remove				
6) Change			•	
Add				
Remove				

E. If amending or	adding ad	ditional A	Articles, enter	change(s) he	ere:			
(attach additiona	i sneeis, ij	necessary)). (Be specif	ic)				
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The date of each amendment(s) adoption:	ly 15, 2015				
Effective date if applicable:	ly 15, 2013.				
(no more than 90 days after amendment file date)					
Adoption of Amendment(s) (CHECK ONE)					
The amendment(s) was/were adopted by the members an was/were sufficient for approval.	nd the number of votes cast for the amendment(s)				
There are no members or members entitled to vote on the adopted by the board of directors.	e amendment(s). The amendment(s) was/were				
Dated Tuly 15, 2013					
(By the chairman or vice chairman of the board, president or other officer-if directors					
have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)					
Martin A. Felici	ano				
(Typed or printed name of person signing)					
President.					
(Title of person signing)					